

Test at Home Implementation and Logistics

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Agenda

1. Opening comments from Dr. Becca Bell on changing approach to COVID-19 in schools and in Vermont
2. Guiding Principles of New Program
3. Program Basics
 1. Testing tools
 2. Parameters
 3. Approaches
 4. Communications strategies
4. Supply Chain and Inventory Management
 1. What to do if you run out of tests
5. Resources for schools and families

Omicron and Schools

- Move to end CT over break and early January coincided with arrival of Omicron in VT and surge in cases
- Omicron is more transmissible, but appears to be less virulent (more cold-like symptoms)
- New England states appear to be over the peak
- As cases decrease and supply increases testing program will stabilize. Hang in there!

Presumptive and Close Contacts and Ongoing Household Exposure

- Presumptive Contact: student/staff who shared a classroom with another person who tested positive for COVID-19.
- Close Contacts (3-6 ft, 15 mins or more): not a category in school exposures anymore, only through community exposure.
- Ongoing Household Exposure: student/staff who are in ongoing contact with a positive COVID case within the household.

Why “presumptive contacts”?

- The speed at which the current Omicron variant spreads means we need to move faster to combat the new variant.
- Contact tracing to identify close contacts (as in TTS) requires determining the infectious period of the case, when the positive case was at school, and who was in contact.
- Identification of close contacts – often 3 to 5 for each case (and potentially more in school settings) – takes time and cannot be sustained with high case counts.
- Our growing scientific experience with the Omicron variant indicates that it spreads faster than the earlier strains, which means the highest risk of transmission often occurs before symptom onset or a positive test.
- Our new approach is presumptive contact tracing. This means, once a positive case is identified in a class, we consider ALL the students in the class to be contacts. This is a more conservative approach, and more people will be notified.

Guiding Principles of New Program

1. Keeping Schools Open- using testing to stabilize school operations (staffing shortages, high case counts) in context of omicron surge
2. Keeping kids in school for in-person instruction
3. Moving away from processes that do not work in Omicron environment (Contact Tracing, surveillance testing, Test to Stay)

Test at Home Program Basics

1. School learns of a positive case in a student or staff member.
2. School notifies students/families that there is a case in their class. Classmates are considered “presumptive contacts.”
3. School makes take home antigen tests available to presumptive contacts based on vaccination status.
4. The start date for Test at Home is based on the date the school was notified or learned of a positive case.
5. Schools may also make tests available to “close contacts” through community exposure and ongoing household contacts to allow students/staff to attend schools

*Reminder: PreK students attending programs that are at K-12 buildings are eligible to participate in the program.

2 tests or 5 tests? Who gets what?

- 2 Tests
 - Vaccinated students, staff with a booster or the primary series within 5 months
- 5 Tests
 - Unvaccinated students, staff who have not received their primary series or are more than 5 months out from their primary series and have not yet had a booster
- +5 Tests: ongoing household exposures

Testing Toolbox

1. Take Home antigen tests: Intrivo, Ihealth, BinaxNow, Quidel (2-packs)
 - a) Can use any leftover Quidel 10 packs for in school testing (symptomatic students/staff) or send home for sibling households
 - b) Can be used in school for diagnostic testing or sent home (with consent)
2. School-based antigen tests (CLIA-waived): BinaxNow ProKits (box of 40)
 - a) Can only be used in schools (with consent)
3. PCR take home kits (Binx kits): still available to order through webform, require UPS or courier, long lead time for results
4. LAMP tests:
 - a) Will replace PCR in schools for diagnostic testing
 - b) Rapid, highly accurate test
 - c) Limited quantities, *must not be used for surveillance testing*

Compliance: what role does the school play?

Schools should offer testing to students who are presumptive contacts and out of school exposures, but **should not**:

- Require families to report test results to attend school
- Prevent asymptomatic students from returning to school if they do not test
- Close schools if they do not have adequate take home testing supplies

Quarantine and Test at Home

- Presumptive contacts do not need to otherwise quarantine during their testing periods.
- Close contacts to a case outside of school are recommended to quarantine according to Vermont Department of Health [guidance](#), but may attend school.

Symptomatic Students/Staff

- **Hot off the presses:** Pediatric Flow Chart: [return to school childcare decision tree.pdf \(uvm.edu\)](https://www.uvm.edu/~uvmc/return_to_school_childcare_decision_tree.pdf)
- Symptomatic students:
 - testing strongly recommended
 - they may return to school
 - after 2 negative antigen tests or 1 negative PCR/LAMP test
 - + symptom improvement
 - + fever free for 24 hours (without medication)
- If family is not testing (either refuse or no tests available), then schools should treat as COVID positive and follow VDH guidance for isolation.
- Do not need a negative test to return to school after isolation period.

Schools above 80% Vaccination

- Do not need to track presumptive contacts.
- May send general contact letter and offer tests based on vaccination status.
- May offer tests for out of school exposures, diagnostic testing, for positive students/staff on day 4/5.

Some other basics

- Weekends
 - Test for 5 consecutive days, including the weekends
 - Do not need to test on Monday if beyond 5 days
- Notification of case after hours/late in the school day/weekends
 - Provide opportunity to take home tests the following school day

Approaches

Low # of Presumptive Contacts/Elementary Schools

- Identify presumptive contacts
- Send home template letter
- Either send kits home with students OR offer them in letter to families and supply based on demand

High # of Presumptive Contacts/Middle and High School

- Identifying presumptive contacts is not feasible (too many cases, single staff member across multiple classrooms, etc)
- Use general contact letter:
 - Could include list of classrooms with presumptive contacts
 - Could be a general exposure letter
 - Offer tests based on vaccination status
 - May require some additional outreach to families to ensure equitable distribution

Communications Strategies

- [Template letters](#) (translations are in the pipeline!)
- [Videos from VDH](#) on use of tests
- All Calls with list of impacted classrooms or general exposure call offering tests
- +80%: low exposure letter, offer of test kits based on vaccination status
- Target emails using SIS (pull class roster, send emails only to families in those classes)

Supply and Inventory Management

*Antigen testing supplies are not unlimited and there are other groups needing the same supply

- Modeling/estimating test use
 - Rough estimate of 1.5-2.5 tests/student/week while case counts are high
- Ordering and reporting
 - [Webform](#)
 - One week burn rate (how many tests did you hand out in the past 7 days)
 - DO NOT place testing orders via email
- Cadence
 - Plan on a week for resupply

Estimating Test Kit Supply

		% of population exposed weekly										
		0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Vaccination Rate	0%	0.00	0.50	1.00	1.50	2.00	2.50	3.00	3.50	4.00	4.50	5.00
	10%	0.00	0.47	0.94	1.41	1.88	2.35	2.82	3.29	3.76	4.23	4.70
	20%	0.00	0.44	0.88	1.32	1.76	2.20	2.64	3.08	3.52	3.96	4.40
	30%	0.00	0.41	0.82	1.23	1.64	2.05	2.46	2.87	3.28	3.69	4.10
	40%	0.00	0.38	0.76	1.14	1.52	1.90	2.28	2.66	3.04	3.42	3.80
	50%	0.00	0.35	0.70	1.05	1.40	1.75	2.10	2.45	2.80	3.15	3.50
	60%	0.00	0.32	0.64	0.96	1.28	1.60	1.92	2.24	2.56	2.88	3.20
	70%	0.00	0.29	0.58	0.87	1.16	1.45	1.74	2.03	2.32	2.61	2.90
	80%	0.00	0.26	0.52	0.78	1.04	1.30	1.56	1.82	2.08	2.34	2.60
	90%	0.00	0.23	0.46	0.69	0.92	1.15	1.38	1.61	1.84	2.07	2.30
	100%	0.00	0.20	0.40	0.60	0.80	1.00	1.20	1.40	1.60	1.80	2.00

Out of Take Home Supply? Don't Panic!

- Do not close schools because you don't have take home antigen supply: presumptive contacts are not presumptive positives
- Can you leverage other testing tools to offer if families are anxious or you have operational concerns with staffing?
 - Take home PCR tests
 - School-based antigen tests (with consent)
- Asymptomatic presumptive contacts- continue to come to school

Resources

- AOE Covid Inbox (this goes to Jill and Kate Horton)
- Ilisa and Kaitlyn
- AOE website/FAQs
- Interviews/letters from Dr. Bell and Dr. Lee
- What can you share?

**Questions and Ideas?
We bet you have some!**